

PROP.

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	KELLAM et al.	Examiner:	Chuks N. Onyezia		
Application No.:	10/043,357	Art Unit:	3692		
Filed:	January 9, 2002	Docket No.:	ARIBP064		
Title:	METHOD OF BIDDING TO DRIVE COMPETITION IN AN AUCTION				

CERTIFICATE OF MAILING

I hereby certify that this cor	respondence is being deposited with the United State
Postal Service as First Class	Mail in a prepaid envelope addressed to:
Commissioner for Patents, I	Mail Stop RCE, P.O. Box 1450, Alexandria, VA
22313-1450 on:	
<u> 1115 </u>	(Thu
-	Veronica Pula
	V

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL FILED WITH AMENDMENT B

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

1. Submis	ssion	required unde	er 37 CFR §1.114			
a. [Previously su	bmitted: Consider the amendment(s)/rep	oly under 37 CFF	R §1.116 previously	,
		filed o	on			
			Consider the arguments in the	Appeal Brief or l	Reply Brief previou	ısly
		filed o	on			
			Other			
b. [Enclosed:		11/13/2007 NNG	JYEN1 00000802 500685	10043357
		\boxtimes	Amendment/Reply	01 FC:1801 02 FC:1251	810.00 DA 120.00 DA	
			Affidavit(s)/Declaration(s)	RE LOSTEDI	160.00 NH	
			Information Disclosure Statem	ent (IDS)		
			Other			

c. Fee Calculation: The fee for excess claims, if applicable, has been calculated as shown below.

				Small Entity		Large Entity		
				Rate	Fee		Rate	Fee
RCE FILING F	EE		x \$405 = \$		OR	x \$810 = \$	810.00	
CLAIMS	After RCE	*HP	· Extra					
Total	30	30		x \$25 = \$		OR	x \$50 = \$	
Independent	4	4		x \$105 = \$		OR	x \$210 = \$	
Multiple Depen	dent Claims	-0-	x \$185 = \$		OR	x \$370 = \$		
*HP = Highest pr	reviously paid		TOTAL FEES \$			TOTAL FEES \$	810.00	

"	P = Highest pres	iously paid	ТО	TAL FEES \$	j	TOTA	L FEES\$	810.00	
).	Miscella	neous:					•		
	a.	Suspension of action 37 CFR §1.103(c) for a period				•	on is reques	ted under	
	b	Other							
	\boxtimes	Applicant hereby petitions for	or an	extension o	f time as f	ollow	s:		
				SMALL ENTITY			LARGE ENTITY		
				SMALL I	ENTITY		LARGE	ENTITY	
				Rate	Add'l Fee	 	Rate		
	X Extension	n for Response within FIRST month		 		OR		Add'l Fe 120.00	
		n for Response within FIRST month		Rate		OR OR	Rate	Add'l Fe	
	Extension			Rate x \$60 = \$		-	Rate x \$120 = \$	Add'l Fe 120.00	
	Extension Extension	for Response within SECOND month		Rate x \$60 = \$ x \$230 = \$		OR	Rate x \$120 = \$ x \$460 = \$	Add'l Fe 120.00	

- 5. Enclosed is our Check No. __ in the amount of \$_____ to cover the RCE Fee required under 37 CFR §1.17 (e), the additional claim fee, if any, and/or extension of time fees.

 6. Please charge Deposit Account No. 50-0685 (ARIBP064) in the amount of \$930.00 to cover the RCE Fee required under 37 CFR §1.17 (e), the additional claim fee, if any, and/or extension of time fees.
- 8. Applicant Initiated Interview Request Form.
- 9. Please continue to send correspondence to the following address:

CUSTOMER NO. 21912

VAN PELT, YI & JAMES LLP 10050 N. Foothill Blvd., Ste. 200 Cupertino, CA 95014

Tel (408) 973-2585 Fax (408) 973-2595

Date:	11	5	107

Robyn Wagner

Reg. No. 50,575